

Effective December 29, 1999

Application or Docket Number

09/663923

| | | | | | 01/00/01/ | | | | | | | | |
|--|-------------|-------------------|----------------------------------|-------------|-----------------|---------------------------------------|------------------|-------------|-----------------|------------------------|-------|-------------------------|------------------------|
| | | CLAI | AIMS AS FILED - PA (Column 1) | | | ART i (Column 2) | | | ALL PE | ENTITY | OR | OTHER SMALL | • |
| FOR | | | NUMBE | RFILED | N | IUMBER | EXTRA | RA | TE | FEE | 1 | RATE | FEE |
| BASIC FEE | | | | | | | 7 2 7 | | , , , | 345.00 | OR | | 690.00 |
| TOTAL CLAIMS | | | 2 | minus 2 | 20= * | / | | X\$ | 9= | | OR | X\$18= | 18 |
| IND | EPENDENT CL | AIMS | 16 | minus | 3 = * | 9 | | ХЗ | 9= | | OR | X78= | 102 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | +13 | i0= | | OR | +260= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TO | | _ | OR | TOTAL | 140 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMA | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | |
| ENT A | | CLA REMA AF | IMS INING FER DMENT | | HK NU PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | RA | ΤE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT A | Total | * | | Minus | ** | | = | X\$ | 9= | | OR | X\$18= | |
| | Independent | * | N 05 M | Minus | *** | NIT OLAIL | = | ХЗ | 9= | | OR | X78= | |
| | FIRST PRESE | NIAHO | N OF MU | JETIPLE DEF | PENDE | NI CLAIN | 1 | +13 | i0= | | OR | +260= | |
| | , | | | | | | | T(| OTAL FFF | | OR | TOTAL ADDIT. FEE | . : |
| | | | mn 1) | | | lumn 2) | (Column 3) | , | · · | | | | |
| AMENDMENT B | | REMA | NIMS NINING TER DMENT | | NI PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | <u> </u> | | Minus | ** | | = | X\$ | 9= | | OR | X\$18= | |
| | Independent | ALTATIO | N OF M | Minus | *** | NIT CL AIR | = | ХЗ | 9= | | OR | X78= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | i0= | 1 | OR | +260= | |
| | | | • | | | | | T(ADDIT | OTAL FFF | · | OR | TOTAL ADDIT. FEE | |
| | | (Colu | mn 1) | | (Co | lumn 2) | (Column 3) | | | , | | | |
| AMENDMENT C | | REMA | NMS NNING TER DMENT | | NI PÁE | GHEST - JMBER VIOUSLY JD FOR | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | | Minus | ** | | = · | X\$ | 9= | | OR | X\$18= | |
| | Independent | * | | Minus | *** | | = | X3 | 9= | | | X78= | |
| V | FIRST PRESE | NTATIO | N OF MU | JLTIPLE DEF | PENDE | NT CLAIN | Λ | | | | OR | 7,70= | <u> </u> |
| +130= | | | | | | | | | | | OR | +260= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | - |